(6/99)

respond unless the form displays a currently valid OMB control number.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

02025762

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB A	OMB APPROVAL									
OMB N	OMB Number: 3235-0076									
Expires:	Expires: May 31, 2002									
L.	Estimated average burden hours per response 1									
SEC US	SEC USE ONLY									
Prefix Serial										
DATE RECEIVED										

iStor Networks, Inc.		Win in the second	DATE RECEIVED
	check if this is an amendment and name has o	changed, and indica. mange	1170414
Filing Under (Check by Type of Filing: [x] Ne	ox(es) that apply): [] <u>Rule 504</u> [] <u>R</u> w Filing [] Amendment	$\frac{\text{(ule 505)}}{2} \text{[x] Rule 506}}{2} \mathcal{A}$	[] Section 4(6) [x] ULOE
 If the second of the second control of the second con	A. BASIC IDE	NTIFICATION DATA	RECEIVED
1. Enter the informatio	n requested about the issuer	And Analysis of the Control of the C	MAR 2 1 2002
iStor Networks, Inc.	if this is an amendment and name has change		363
Address of Executive (Offices (Number and Street, City, State, Zip C	Code) Telephone Number (Inc	cluding Area Code)
Address of Principal B	ve, Suite 250., Irvine, California 92618 usiness Operations (Number and Street, City, t from Executive Offices)	State, Zip Code) Telephone	Number (Including
	ve, Suite 250, Irvine, California 92618		
Brief Description of Br			ppncessed
storage networking pro Type of Business Orga			PROCESSE
Type of Busiless Orga	mzation		PROCESSED O APR 0 5 2002
[x] corporation	[] limited partnership, already formed	[] other (please spe	recify) THOMSON
[] business trust	[] limited partnership, to be formed		FINANCIAL
· · · · · · · · · · · · · · · · · ·	Month Year		THE CONTRACT OF THE CONTRACT O
Jurisdiction of Incorpo	ration or Organization: [1]2] [0]1] rother foreign jurisdiction) [C] [A]	[x] Actual [] Estimated Postal Service abbreviation	for State:
1 - March 200 - A 200	GENERAL	INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Apply:		Beneficial	[21]	Executive Officer	[x]	Director		General and/or
		Owner						Managing Partner
Full Name (Last name first, if indivi Huang, Simon	dual)		101400000000000000000000000000000000000		000 ba 0 885 y 888 y 998 dec.			
Business or Residence Address (Nui		•	, State	e, Zip Code)		**************************************		
7585 Irvine Center Drive, Irvine, Ca	was a contract transport of			C.F.		Dimater		
Check Box(es) that [] Promoter Apply:	[x]	Beneficial Owner	įΧ _.	Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indivi Huang, Frank				i Santa Sentangan Se				addinanting dender I benere y neer de <u>de</u> de er segende andere op de een een een een een een een een een
Business or Residence Address (Nur Full Name (Last name first, if indivi 7585 Irvine Center Drive, Irvine, Ca	dual)	•	, State	e, Zip Code)				er entere entere entre ent
Business or Residence Address (Nur			State	e, Zip Code)		13 03 T. 32 4 (12 T. 34) 14 T. 40 T. 60 T.		
Check Box(es) that [] Promoter Apply:	[]	Beneficial Owner		Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indivi	dual)				X-X-104-00-00-00-00-00-00-00-00-00-00-00-00-0	1 000000000000000000000000000000000000	C. 4. C.	
Business or Residence Address (Nui	nber ar	nd Street, City	, State	e, Zip Code)				
Check Box(es) that [] Promoter		Beneficial	ΪŢ	Executive Officer	T	Director	Γĵ	General and/or
Apply:		Owner						Managing Partner
Full Name (Last name first, if indivi	dual)		- CANADA CONTRA				and the second second	
Business or Residence Address (Nu	nber ar	nd Street, City	, State	e, Zip Code)				
Check Box(es) that [] Promoter Apply:		Beneficial Owner		Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indivi	dual)		and the control of the second			-des 44 November 1944 (1957)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Business or Residence Address (Nui	nber ar	nd Street, City	, State	e, Zip Code)	**************			The second and the second manager in manager of the second
Check Box(es) that [] Promoter Apply:	[]	Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indivi	dual)							
Business or Residence Address (Nur	nber ar	nd Street, City	, State	e, Zip Code)		**************************************	or a second second second	
(II.co.)	lant, c	hoot or conv	and s	use additional copies	of this	schoot gen	00000	NEW \

3

B. INFORMATION ABOUT OFFERING

1. Has	the iss	uer solo	d, or do	es the is	suer int	end to	sell, to 1	non-acc	redited	investo	rs in th	is offering?	Yes []	No [x]	53.84.50.00 (F) (E)
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							\$ None	[·]							
3. Does the offering permit joint ownership of a single unit?									Yes	No					
4. Ent indired of secregiste five (5 inform None	er the incept of the control of the	nformat y comm in the of th the S ons to be or that	ion requission of the following for the followin	uested to simil If a per // or with are assort deale	for each ar remurson to be a state ociated per only.	person neration be listed or state	who han for so lis an a	ns been licitatio ssociate ne name	or will n of pu d perso of the	be paid rchaser on or ag broker	or give s in con ent of a or deale	n, directly or nection with sales broker or dealer er. If more than set forth the	[x]	[]	
Full N	ame (L	ast nan	ne first,	if indiv	idual)	*************************	W - W - W - W - W - W - W - W - W - W -	21.41.212.000		4X+X2X4X+X+X+X+X+X+X+X+X+X+X+X+X+X+X+X+X	**************************************		\$2000 \$400 \$400 \$400 \$400 \$400 \$400 \$400	Product to Programme (** 15. a c 6 12 12 12 12 12 12 12 12 12 12 12 12 12	
Busine	ess or F	Residenc	e Addr	ess (Nu	mber aı	nd Stree	t, City,	State, 2	Zip Cod	le)			<u></u>		······································
Name	of Ass	ociated	Broker	or Dea	ler				and the state of great			agramation delectric del Primer del Primer del Calabrida del Calabrida del Calabrida del Calabrida del Calabrida		18 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
					Solicited dual Sta				Purchas] All Si	tates			erior en estar en en escara en escara en
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[NC]	[DC] [MA] [ND] [WA]	[OH]	[GA] [MN] [OK] [WI]		[ID] [MO] [PA] [PR]			
Full N	ame (L	ast nam	ne first,	if indiv	idual)	***************************************	11.00.00.00°00 40.00°1.0000		0.00-0.16ht3t;V*N0AVAV.	#1.24 (2.24		en Colombrata de Partir de Calendar A. Calendar de Lacida de Lacida de Lacida de Calendar		**************************************	100 (100 - 100 - 100)
Busin	ess or F	Residenc	e Addr	ess (Nu	ımber aı	id Stree	et, City,	State, 2	Zip Coc	le)	**************************************				AND THE CASE OF ACCRESS OF THE
Name	of Ass	ociated	Broker	or Dea	ler			Construction or was the head of he	X41.48 (47.45 10.00)		edilianoscuolost (de et				indial distribution
					Solicited dual Sta				Purchas] All Si	tates		And the second s	**************************************
[AL] [IL] [MT] [RI]	[IN]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[CO] [LA] [NM] [UT]	[ME] [NY]	[NC]	[ND]	[MI] [OH]	[OK]	[MS] [OR]	[PA]			
Full N	ame (L	ast nam	ne tirst,	if indiv	idual)		2 - 17 (1 - 2007 - 2004 - 20 ()			24 26 C	A AND THE STATE OF				
Busine	ess or F	Residenc	e Addr	ess (Nu	mber aı	nd Stree	et, City,	State, 2	Zip Cod	le)	Name and the state of the state				20770W 700 W
Name	of Ass	ociated	Broker	or Dea	ler					1.0	***************************************			A 2 - CA -	
					Solicited dual Sta				Purchas] All Si	rates	and an extension of the section of t	alexander (Albert 1971 — 1975) proj. (Albert 1975)	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[ME]	[DE] [MD] [NC] [VA]	[ND]	[OH]	[GA] [MN] [OK] [WI]	[MS] [OR]	[ID] [MO] [PA] [PR]			
***************************************		*************		(Iliso	blank s	hoot o	r oonv	and use		onal ac	nice of	this sheet as nece	occorn)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

4

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1 Enter the aggregate offering price of securities included in this offering and the